

○ CPER ○ PPER

State of Nevada - Special Pay / Time Adjustment Sheet

Agency 

(B/A)
Home Org

Agency Name	
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****For Central Payroll Use Only****

Approved
(Initials)

[illegible]

Prepared By	Date
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Telephone Number

Entered (Initials) Date / /

Approved By	Date
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This is to be signed when paying leave balances for terminating employees to certify that all leave taken has been reported and the employee is entitled to payment of the balance(s).

Signature _____ Date _____